

State of California
Department of Industrial Relations
Division of Workers' Compensation

FEE DISCLOSURE STATEMENT ADDENDUM

The following information is voluntarily disclosed and supplements the requirements of DWC-3

The Workers Compensation Appeals Board is awarding fees of **15%** on usual cases and 18-20% on complex cases. 15% is the minimum fee this office requests. These benefits include permanent and temporary disability as well as future medical care if provided in the form of a monetary award (through a settlement). If necessary, we may ask for an order withholding 15% of temporary or permanent disability in order to ensure payment for legal services. If we have also represented you before the Rehabilitation Unit, there may also be a fee allowed for this representation.

A separate attorneys' fee of up to 33% of the benefits awarded will be requested on penalty issues. These penalties may arise from discrimination under Labor Code §132, Serious and willful cases or unreasonable refusal of delay of workers' compensation benefits.

We may withdraw from representing you by mailing written notice to you at the last address you have provided to your attorney. If we have filed an Application for Adjudication of Claim on your behalf with the Workers' Compensation Appeals Board, we must also obtain permission from the Board before withdrawing from representation.

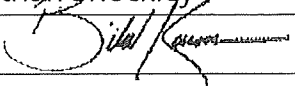
Unless you and your attorney have entered into a separate written fee agreement for representation in other matters, your attorney will only represent you regarding the workers' compensation benefits for those work injuries that you have specifically disclosed to your attorney. Your attorney will not represent you in any other matters, including workers' compensation benefits for injuries that you have failed to disclose to your attorney, actions against your employer for serious and willful misconduct, and/or Labor Code §132a (nondiscrimination policy) violations, or any third party lawsuits, labor law matters, or disability, health insurance, retirement, unemployment, or other benefits unless discussed and agreed. If you wish to pursue any of these other matters, it will be your sole responsibility to either make arrangements with your attorney to represent you by way of a separate written retainer or agreement or to make sure they are handled in a timely fashion. Many of these matters have a one-year statute of limitations.

At the conclusion of the representation we will provide you with your complete file of all documents in our possession regarding your case via disc with .pdf copies. Once delivered we will have no duty to preserve any aspects of your file.

I understand and consent that my attorney has authority to agree and/or refer me to medical evaluations such as QME (Qualified Medical Exams) or AME (Agreed Medical Exams), including the choice of such examiners, appointments without my prior consent. I understand these evaluations may have an impact on the outcome of my case.

Any person who makes or causes to be made any knowingly false or fraudulent material statement or material representation for the purpose of obtaining or denying worker' compensation benefits or payments is guilty of a felony.

I hereby declare under penalty of perjury that I am the attorney representing the above-named employee, or am an attorney licensed by the State Bar of California regularly employed by the firm by which the employee will be represented, and have advised the employee of their rights as set forth above and in Labor Code section 4906(e) and (g)(1).

Employee's Signature: Jonathan Shockley Date: March 7, 2019
Jonathan Shockley
Employee's Name: Jonathan Shockley
Attorney's Signature:  Date: March 12, 2019

Farber and Company Attorneys, P.C.
333 Hegenberger Road, Suite 504
Oakland, CA 94621
Tel: 510-444-2512

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If you choose to be represented by an attorney, your attorney's fees will be deducted from your benefits. The fee will be approved by the Workers' Compensation Appeals Board with consideration given to the: (1) responsibility assumed by the attorney; (2) care exercised in representing you; (3) time involved; and, (4) results obtained.

Attorneys's fees normally range from 9% to 12% of the benefits awarded.

There are certain circumstances where your employer (or his/her insurer) may be liable to pay your attorney's fees. For example, if employer disputes a permanent disability evaluation obtained when you were not represented by an attorney, your employer may be liable for any attorneys' fees you incur because of the dispute.

If at any time you no longer wish to be represented by the attorney, you may withdraw from representation by notifying the attorney. If you withdraw from representation, the fee amount found by a workers' compensation judge to be the fair value of any work the attorney did in your case will be deducted from your award.

Your case is being filed at the Division of Workers' Compensation at the following location:

Oakland - OAK

The employee has been advised of the district office at which his or her case will be filed and that he or she may be required to attend conferences or hearings at this location at his or her own expense.

An Information and Assistance Officer may be able to answer your questions concerning your workers' compensation benefits at no charge to you. The Officer may be able to resolve your problems without the need for litigation.

Call this toll-free number: 1-800-736-7401

Employee's Signature: Jonathan Shockley Date: March 7, 2019
Jonathan Shockley

Employee's Name: Jonathan Shockley

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Attorney's Signature: Bilal Kassem Date: March 12, 2019

Attorney's Name: Bilal Kassem

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